BEST AVAILABLE COPY 101010144													
•								A	Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOR									DE920000087USI				
Effective October 1, 2001													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL E	YTITY	OR	OTHER		
TOTAL CLAIMS			21				ſ	RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			Q minus 20=		•			X\$ 9=		OR	X\$18=	13	
INDEPENDENT CLAIMS			3 minus 3 =					X42=		OR	X84=	10	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT				+140=			OR	+280=		
• 11	the difference	in column 1 is	less than zero, enter "O" i			column 2	L	TOTAL		OR	TOTAL	758	
CLAIMS AS AMENDED - PART II									<b></b>	,	OTHER		
2-17-05; (Column 1) (Column 2) (Column 3)								SMALL	ENTTTY	OR	SMALL		
MTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total ·	· 21	Minus	÷ 0	-	- /	ľ	X\$/9=	PEE.	OR	X\$18=	-FEE	
ME	Independent	• 3:	Minus	***	3	- (	ŀ	K42=	•	OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OH			
								+140=.		OR	+280 <del>=</del>		
1/22/2								TOTAL DOTT. FEE		OR	YOYAL ADDIT, FEE		
ADOIT. FEE													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• 21	Minus			9		XS 9=		OR	X\$18=		
	Independent	NTATION OF MI	Minus	ese DENIDENT			I	X42=		OR	X84=		
_	PINOT PRESE	AIAIION OF MIC	ETIPLE DE	·	·		Ų.	+140=		OR	+280=	·	
		•	•	•			Ã	YOTAL DOIT, FEE		OR	TOTAL ADDIT. FEE	·	
		(Column 1)		(Colum	nn 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER SUSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	•· ·	Minus	**		e	F	X\$ 9=	FEE	OR	X\$18=	FEE	
	Independent	•	euniM	100			H			UT			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X42=		OR	X84=		
+1									•	OR	+280=	,	
* If the entry in column 1 is less than the entry in column 2, write "V" in column 3.  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **OPTION OF TOTAL ADDIT. FEE  ADDIT. FEE  ADDIT. FEE													
		mber Previously Pai ther Previously Pai					r tours	d in the ap	propriate box	in col	umn 1.		